



DIVISION OF CHILDREN AND FAMILY SERVICES (DCFS)

COORDINATED BENEFITS REFERRAL

DCFS PERSON ID NUMBER

DATE

DCFS CASE NUMBER

1. TO		COMMUNITY SERVICES OFFICE (CSO) FINANCIAL SPECIALIST'S NAME		COMMUNITY SERVICES OFFICE		MAILSTOP			
2. FROM:		DCFS ELIGIBILITY SPECIALIST'S NAME		DCFS OFFICE		MAILSTOP			
3. RE:		TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF)/GENERAL ASSISTANCE (GA) LEGAL GUARDIAN'S NAME				TANF AUID NUMBER			
		CHILD'S NAME			BIRTHDATE		SOCIAL SECURITY NUMBER		
		LIST ADDITIONAL CHILD(REN), BIRTHDATE(S), AND SOCIAL SECURITY NUMBER(S) BELOW.							
INFORMATION FROM DCFS ELIGIBILITY SPECIALIST									
4. REMOVAL OF CHILD FROM HOUSEHOLD									
a. Child(ren) removed from a TANF household effective (date): _____.									
b. Child(ren) expected to remain out-of-home: <input type="checkbox"/> Less than 90 days. <input type="checkbox"/> More than 90 days. The expected date of return to the home is _____ or <input type="checkbox"/> Unknown.									
c. Child(ren) placed in: <input type="checkbox"/> Foster care. <input type="checkbox"/> Other (specify): _____									
d. DCFS: <input type="checkbox"/> is <input type="checkbox"/> is not providing foster care maintenance payments.									
5. RETURN OF CHILD TO THE HOUSEHOLD FROM FOSTER CARE									
a. Child is expected to return from foster care to the home on (date): _____.									
b. DCFS: <input type="checkbox"/> is <input type="checkbox"/> is not providing foster care maintenance payments.									
c. <input type="checkbox"/> If otherwise eligible, approve assistance to include this child up to thirty days before child's return (as noted above).									
6. CHILD'S INCOME									
a. <input type="checkbox"/> Child has no income.									
b. <input type="checkbox"/> Child has income: Source: _____; Amount: \$ _____ per month.									
INFORMATION FROM CSO FINANCIAL SERVICES SPECIALIST (FSS)									
7. FINANCIAL SERVICES RESPONSE									
a. <input type="checkbox"/> Child has been removed from the assistance payment, effective (date): _____.									
b. <input type="checkbox"/> Assistance grant will continue to include child during the temporary removal, pending the child's expected return to the home by (date) _____ (within 90 days of removal).									
c. <input type="checkbox"/> Assistance grant is approved for child returning from foster care, effective (date) _____ (within 30 days of child's return to home).									
8. COMMENTS									
DCFS SIGNATURE				DATE		FSS SIGNATURE		DATE	
TELEPHONE NUMBER				TELEPHONE NUMBER					

DISTRIBUTION: White - CSO Notice

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Pink - Federal Revenue File

INSTRUCTIONS

1. If, upon placement of a child into department-paid substitute care, that child has received Temporary Assistance for Needy Families (TANF) payments, the Division of Children and Family Services (DCFS) office shall complete Parts 1, 2, 3, and 4 of the Coordinated Benefits Referral, DSHS 14-226; and send it to the Community Services Office (CSO) listed in Part 1.
2. If it is expected that TANF payments will continue to the removal home for up to 90 days, particular attention must be paid to Part 4. Note if the child is expected to return home within 90 days of placement and if the DCFS maintenance payments will be made.
3. If it is expected that a child, who has been in placement longer than 90 days will be returning from foster care to a TANF eligible household, the child may be included in the TANF grant 30 days prior to the child's return. The DCFS local office shall complete Parts 1, 2, 3, 5 and 6; and send it to the CSO for processing.